

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

 PAGE 1 OF 2  
 FOR SE OF FORM 24/48

|  |  |   |   |  |  |
|--|--|---|---|--|--|
| NAME OF COMMITTEE (In Full)<br><b>SMP</b>  |  |   | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00484642   |  |  |
| Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M M</span> / <span style="border: 1px solid black; padding: 2px;">D D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> |  |   |   |  |  |
| Full Name of Payee<br><b>Blueprint Interactive</b>   |  |   | Date of Public Distribution/Dissemination<br><span style="border: 1px solid black; padding: 2px;">06</span> / <span style="border: 1px solid black; padding: 2px;">20</span> / <span style="border: 1px solid black; padding: 2px;">2018</span> |  |  |
| Mailing Address 1730 Rhode Island Ave NW<br>Ste 1014   |  |   | Amount<br><span style="border: 1px solid black; padding: 2px;">75000.00</span>  |  |  |
| City Washington State DC Zip Code 20036-3112   |  | Transaction ID : 500040648<br>Date of Disbursement or Obligation<br><span style="border: 1px solid black; padding: 2px;">M M M</span> / <span style="border: 1px solid black; padding: 2px;">D D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> |   |  |  |
| Purpose of Expenditure<br>Online Advertising & Production Costs - Estimate   |  | Category/Type <span style="border: 1px solid black; padding: 2px;"></span>  |   |  |  |
| Name of Federal Candidate<br>Rosendale, Matt, , ,  |  |   | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MT  |  |  |
| Calendar Year-To-Date<br>Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">769458.61</span>  |  |   | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018<br><input type="checkbox"/> Other (specify) ▶   |  |  |
| Full Name of Payee<br><b>Shorr Johnson Magnus</b>  |  |   | Date of Public Distribution/Dissemination<br><span style="border: 1px solid black; padding: 2px;">06</span> / <span style="border: 1px solid black; padding: 2px;">20</span> / <span style="border: 1px solid black; padding: 2px;">2018</span> |  |  |
| Mailing Address 100 N 20th St<br>Ste 201   |  |   | Amount<br><span style="border: 1px solid black; padding: 2px;">16140.98</span>  |  |  |
| City Philadelphia State PA Zip Code 19103-1454   |  | Transaction ID : 500040647<br>Date of Disbursement or Obligation<br><span style="border: 1px solid black; padding: 2px;">M M M</span> / <span style="border: 1px solid black; padding: 2px;">D D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> |   |  |  |
| Purpose of Expenditure<br>Media Production Costs - Estimate  |  | Category/Type <span style="border: 1px solid black; padding: 2px;"></span>  |   |  |  |
| Name of Federal Candidate<br>Braun, Mike, , ,  |  |   | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: IN  |  |  |
| Calendar Year-To-Date<br>Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1718987.33</span>   |  |   | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018<br><input type="checkbox"/> Other (specify) ▶   |  |  |
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶   |  |   | <span style="border: 1px solid black; padding: 2px;">91140.98</span>  |  |  |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶  |  |   | <span style="border: 1px solid black; padding: 2px;"></span>  |  |  |
| (c) TOTAL Independent Expenditures..... ▶  |  |   | <span style="border: 1px solid black; padding: 2px;"></span>  |  |  |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.  |  |   |   |  |  |
| Signature <u>Lambe, Rebecca, , ,</u><br><div style="text-align: right;">[Electronically Filed]</div>   |  |   | Date <span style="border: 1px solid black; padding: 2px;">06</span> / <span style="border: 1px solid black; padding: 2px;">22</span> / <span style="border: 1px solid black; padding: 2px;">2018</span>   |  |  |

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|--|---|
| NAME OF COMMITTEE (In Full)<br><b>SMP</b>  | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00484642 |
| Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on |   |

|   |             |  |   |  |  |
|---|-------------|--|---|--|--|
| Full Name of Payee<br><b>Waterfront Strategies</b>      |             |  | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br><b>06 / 20 / 2018</b>  |  |  |
| Mailing Address 3050 K St NW<br>Ste 100                 |             |  | Amount<br><b>302822.65</b>  |  |  |
| City<br>Washington                                      | State<br>DC | Zip Code<br>20007-5161   | Transaction ID : <b>500040646</b>   |  |  |
| Purpose of Expenditure<br>Media Buy - Estimate          |             | Category/<br>Type  | Date of Disbursement or Obligation<br>MM / DD / YYYY  |  |  |
| Name of Federal Candidate<br>Braun, Mike, ,             |             | <input type="checkbox"/> Support<br><input checked="" type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: _____<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>IN</b> |  |  |
| Calendar Year-To-Date<br>Per Election for Office Sought |             | <b>1718987.33</b>  | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br>2018 <input type="checkbox"/> Other (specify) ▶               |  |  |

|   |       |   |  |  |  |
|---|-------|---|--|--|--|
| Full Name of Payee                                      |       |   | Date of Public Distribution/Dissemination<br>MM / DD / YYYY  |  |  |
| Mailing Address   |       |   | Amount   |  |  |
| City  | State | Zip Code  | Date of Disbursement or Obligation<br>MM / DD / YYYY   |  |  |
| Purpose of Expenditure                                  |       | Category/<br>Type   |  |  |  |
| Name of Federal Candidate                               |       | <input type="checkbox"/> Support<br><input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: _____<br><input type="checkbox"/> President <input type="checkbox"/> Senate State: _____ |  |  |
| Calendar Year-To-Date<br>Per Election for Office Sought |       |   | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▶                |  |  |

|  |                  |
|--|------------------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶    | <b>302822.65</b> |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶ |                  |
| (c) <b>TOTAL</b> Independent Expenditures..... ▶                   | <b>393963.63</b> |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Lambe, Rebecca, , ,

[Electronically Filed]

Date

MM / DD / YYYY  
**06 / 22 / 2018**

Signature